

MEMORIAL COMM HOSP & LTC FACILITY
313 STOUGHTON RD

EDGERTON 53534 Phone:(608) 884-3441
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/04): 61
Total Licensed Bed Capacity (12/31/04): 61
Number of Residents on 12/31/04: 59

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 60

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		33.9
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		40.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.4	More Than 4 Years		25.4
Day Services	No	Mental Illness (Org./Psy)	42.4	65 - 74	0.0			-----
Respite Care	No	Mental Illness (Other)	1.7	75 - 84	23.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	57.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	15.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	8.5	65 & Over	96.6	-----		
Transportation	No	Cerebrovascular	13.6		-----	RNs		11.6
Referral Service	No	Diabetes	5.1	Gender	%	LPNs		13.8
Other Services	No	Respiratory	6.8	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	22.0	Male	25.4	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	74.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	2.6	141	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.7
Skilled Care	3	100.0	272	36	94.7	121	0	0.0	0	17	94.4	180	0	0.0	0	0	0.0	0	56	94.9
Intermediate	---	---	---	1	2.6	99	0	0.0	0	1	5.6	172	0	0.0	0	0	0.0	0	2	3.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	3	100.0		38	100.0		0	0.0		18	100.0		0	0.0		0	0.0		59	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	0.0	Bathing	5.1	83.1	11.9	59
Private Home/With Home Health	8.6	Dressing	6.8	79.7	13.6	59
Other Nursing Homes	5.7	Transferring	22.0	47.5	30.5	59
Acute Care Hospitals	65.7	Toilet Use	23.7	47.5	28.8	59
Psych. Hosp.-MR/DD Facilities	0.0	Eating	62.7	25.4	11.9	59
Rehabilitation Hospitals	20.0	*****				
Other Locations	0.0					
Total Number of Admissions	35	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	10.2	Receiving Respiratory Care	10.2	
Private Home/No Home Health	5.6	Occ/Freq. Incontinent of Bladder	72.9	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	13.9	Occ/Freq. Incontinent of Bowel	45.8	Receiving Suctioning	0.0	
Other Nursing Homes	0.0			Receiving Ostomy Care	1.7	
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding	1.7	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets	30.5	
Rehabilitation Hospitals	0.0					
Other Locations	2.8	Skin Care		Other Resident Characteristics		
Deaths	77.8	With Pressure Sores	5.1	Have Advance Directives	100.0	
Total Number of Discharges		With Rashes	1.7	Medications		
(Including Deaths)	36			Receiving Psychoactive Drugs	64.4	

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.4	91.7	1.07	88.8	1.11
Current Residents from In-County	94.9	85.3	1.11	77.4	1.23
Admissions from In-County, Still Residing	48.6	14.1	3.45	19.4	2.50
Admissions/Average Daily Census	58.3	213.7	0.27	146.5	0.40
Discharges/Average Daily Census	60.0	214.9	0.28	148.0	0.41
Discharges To Private Residence/Average Daily Census	11.7	119.8	0.10	66.9	0.17
Residents Receiving Skilled Care	96.6	96.2	1.00	89.9	1.07
Residents Aged 65 and Older	96.6	90.7	1.07	87.9	1.10
Title 19 (Medicaid) Funded Residents	64.4	66.8	0.96	66.1	0.97
Private Pay Funded Residents	30.5	22.6	1.35	20.6	1.48
Developmentally Disabled Residents	0.0	1.4	0.00	6.0	0.00
Mentally Ill Residents	44.1	32.7	1.35	33.6	1.31
General Medical Service Residents	22.0	22.0	1.00	21.1	1.05
Impaired ADL (Mean)*	48.1	49.1	0.98	49.4	0.97
Psychological Problems	64.4	53.5	1.20	57.7	1.12
Nursing Care Required (Mean)*	6.4	7.4	0.86	7.4	0.86